HS002169

Application to Alter or Repair an Onsite Wastewater Treatment System

The applicant is applying for a permit to: ☐ALTER ☑REPAIR an existing Onsite Wastewater Treatment System, and agrees to comply with LMC 24.38 or County Resolution 02-0030.

1. **Street Address (No Rural Route):** 12951 Pioneers Blvd

   Legal Description of Property: Township: 9 Range: 8 Section: 8

   Block ____ Lot 3 SubDivsion ____ Add: ____

   ***Parcel ID** 22.08.200.002.000 (i.e. 99-99-999-999-999)

2. **Property use:** ☑ Residential ☐ Commercial ☐ Other use (Describe: ____)
   Number of bedrooms 3 Does the system have a: ☐ Garbage Grinder ☐Large Capacity Tub

3. **Type of Present Individual Disposal System** ☑ septic system ☐ lagoon ☐ other

4. **Description of proposed alteration or repair:** Tank Collapsed, Replace Tank and one lateral that will be abandon for being too close to neighbors well - adding 120' of new lateral.

5. **Current Type of Lateral-** Perf. Pipe Ground **Current Linear Ft. Of Lateral -** 100

   Current Tank Gallonage- 1000

6. **Print Name** Steven Lewis **Address** 3300 N 71st Street **Phone:** 402 432 1082

   Applicant Signature: SL

Please contact LLCHD for the current permit fee for this application
Fee must be included before the application will be processed. Incomplete information will delay processing.

HEALTH DEPARTMENT USE ONLY

☐Municipal Code 24.38 ☐County Resolution Number 02-30

Date received ___/___/___ REVIEW: ☐ Approved ☐ Disapproved By: ____

Comments (if any): ____

Site visits
Date ___/___/___ By ____
Date ___/___/___ By ____

Installation final written approval
Date ___/___/___ By ____

Return application to: Lincoln-Lancaster County Health Department
Environmental Public Health Division
3140 "N" Street, Lincoln, NE 68510
Phone: (402) 441-8643

Business Office Use Only
Received: Date: 1/13/21 Amount $235.00 Check No. 05909 Initials JAD

Revised 4/8/13

Lincoln-Lancaster County Health Department (LLCHD)
Environmental Public Health Division
3140 "N" Street • Lincoln, NE 68510-1614
Phone: 402-441-8022

B

Permit Number:

Onsite Wastewater Treatment System
Soil Evaluation Report

PLEASE PRINT OR TYPE

Onsite System Location

Address 12951 Pioneers Blvd (no rural route) City Lincoln NE, Zip 68461

Owner Duane Wait Address 12951 Pioneers Blvd

Date of Tests 1-10-21 to 1-11-21 Weather: Precipitation Ø Temperature 30°

Percolation Test Data Table

A.	B.	C.	D.	E.	F.	G.	H.	I.	J.	K.	L.	M.	N.
		Saturation/Swelling Time				Water Level Drop Last 30 mins of 4 hr or last 10 mins of 1 hr					Results		
		Start		End		Start			End				
Hole No.	Hole Depth (in)	Date (Mo/Da)	Time (Hr/Min)	Date (Mo/Da)	Time (Hr/Min)	Date (Mo/Da)	Time (Hr/Min)	Initial Water Lev (in.)	Date (Mo/Da)	Time (Hr/Min)	Elapsed Time Interval	Water Level Drop (in)	Percolation Rates (Min/in = mpi)
1	36	1/10	11:00	1/11	11:00	1-10	11-00	6	1-11	11 30	30	3/4	40
2	"	"	"	"	"	"	"	6	"	"	"	1	30
3	"	"	"	"	"	"	"	6	"	"	"	3/4	40
								6					
								6					
								6					
								6					
								6					

Person Conducting Percolation Test

Name: Steven C Lewis
Phone: 402 432 4082
Address 3300 N 71st Street
Lincoln NE, 68507
Soil type (NRCS Mapal/Other) Otoe Silt Loam
Groundwater Depth Over 10'

Sum of Percolation Rates: 110
Average of Rates: 36.6
Rate Used for Calculation: 30-40

DO NOT WRITE BELOW THIS LINE

Reviewing Action

Comments (Soil type, groundwater, floodplain, etc.)

Signature of Reviewing Official _____ Date _____

Lincoln-Lancaster County Health Department
Environmental Public Health Division (402) 441-8027
3131 O Street Lincoln, Nebraska 68510-1514

ON-SITE WASTE WATER SYSTEM
ALTERATION PERMIT
No. HS002169

System Type: Standard

Situs: No Site Address Specified

Issued: 1/15/2021

Expires: 1/15/2022

Description: S8, T9, R8, 6th Principal Meridian, LOT 3 NE

Owner: WANT, DUANE R
12951 PIONEERS BLVD
WALTON, NE 68461

Patricia D. Lopez

Patricia D. Lopez, RN, MSN, Interim Health Director

Dear Applicant:

The above document is your permit to alter an existing On-site Waste Water System at the location listed. Please contact this office once the alteration is complete to obtain final approval before use.

Patricia D. Lopez

Patricia D. Lopez, RN, MSN
Health Director

STEVEN LEWIS
3300 N 71ST ST
LINCOLN, NE 68507

HS002169

SCANNED

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   Current Tank Gallonage- 1000

6. **Print Name** Steven Lewis **Address** 33001 N 71st Street **Phone:** 402 432 1082

   Applicant Signature: [signature]

Please contact LLCHD for the current permit fee for this application
Fee must be included before the application will be processed. Incomplete information will delay processing.

HEALTH DEPARTMENT USE ONLY

☐Municipal Code 24.38 ☑County Resolution Number 02-30

Date received 1/15/21 REVIEW: ☑ Approved ☐ Disapproved By: [signature]

Comments (if any): ____

Site visits
Date 01/12/21 By DJ
Date ___/___/___ By ____

Installation final written approval
Date 01/15/21 By Doug Thiele

Return application to: Lincoln-Lancaster County Health Department
Environmental Public Health Division
3140 "N" Street, Lincoln, NE 68510
Phone: (402) 441-8643

Business Office Use Only
Received: Date: 1/13/21 Amount $235.00 Check No. 05909 Initials [initials]

Revised 4/8/13

Lincoln-Lancaster County Health Department
Environmental Public Health Division
3140 N Street • Lincoln NE 68510-1514
Phone: 402-441-8643

Exhibit 5

Permit Number: H5002169

Onsite Wastewater Treatment System

Inspection Sheet

Date 1/15/21 Legal Description ¼ ¼ Section/Township/Range

Onsite System Location

Address (no rural route) 12951 Pioneers City

Owner Address

Mark One: ☒ Dwelling ☐ Non-dwelling

☐ New System ☒ Alteration [☐ Tank Only ☐ Trench Only] ☐ Lateral Only

☐ Temporary modification (Describe problem causing discharge and reason for temporary modification):

Drainfield Absorption System:

☒ Lateral ☐ Bed ☐ Non-standard (engineer-designed and NDEQ approved) ☐ Holding Tank ☐ Trench

Total square feet of drainfield existing 160' x 3 = 480 sq. Ft. 120' new = 540' (1,020 total) Tank Size 1,000 gals

Total length of laterals 160' existing 120' new Type of Distribution: ☐ Chamber ☐ Perforated Pipe ☒ Other (describe) F2 flow on new laterals

No. of Absorption Laterals 3 Width 3" and 4.5 No. of Drop Boxes Distribution Box 1

Leveling Method Used Laser

Setbacks (Check the Boxes Below if the Required Setback has been Satisfied):

Distance From	Private Well	Public Well	Surface Water	Ground water	Pressure Water Lines	Property Lines
Tank (ft)	50 ☐	500 ☐	50 ☐	NA ☐	10 ☐	5 ☐
Field (ft)	100 ☐	500 ☐	50 ☐	4 ☐	25 ☐	5 ☐

Geographical Coordinates to 6 Decimals:

Tank NA

Lateral #1 Lateral #3

Lateral #2 Lateral #4

Comments:

Inspections prior to Final Approval
Initial DS Date 1/15/21

Follow-Up Date

Follow-Up Date

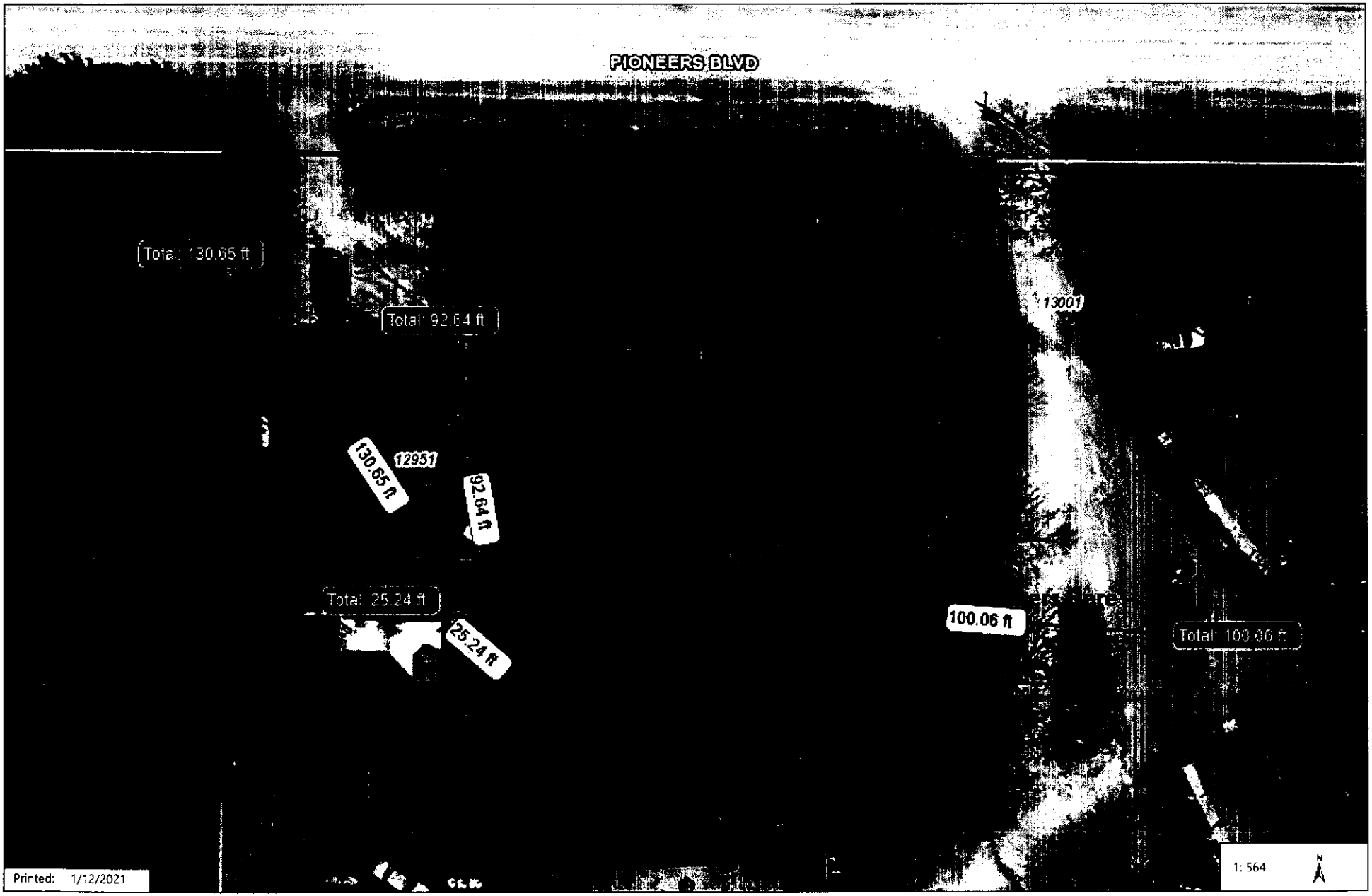
Installation Final Written Approval
By Doug Thiele
Date 1/15/21

Field Note Drawing (See Reverse Side):

Updated 4/15

GIS Viewer
CITY OF LINCOLN - LANCASTER COUNTY, NE

210106 AsBuilt



Disclaimer: The information is presented on a best-efforts basis, and should not be relied upon for making financial, survey, legal or other commitments. If you have questions or comments regarding the data displayed on this map, please email assessor@lancaster.ne.gov and you will be directed to the appropriate department.

Lincoln-Lancaster County Health Department
Environmental Public Health Division
3140 N Street • Lincoln NE 68510-1514
Phone: 402-441-8643

D Exhibit 4

Permit Number:

Onsite Wastewater Treatment System
As-Built Description and Drawing

Type of Onsite Wastewater System: ☐ Lagoon (Skip to Back Page) ☑ Subsurface Septic ☐ Mound

Onsite Wastewater System Location

Address or Legal Description or Parcel Identification Number (PID) 22-08-200-002-000

Owner Duane Want Address 12951 Pioneers Blvd.

A. Wastewater Piping

1. Material: Sch 40 pvc Diameter: 4 in.
2. Distance between dwelling and septic tank: 25 ft.

B. Septic Tank

1. Material Plastic
2. Capacity: 1000 gal
3. Depth to top of tank, below unfinished grade: 3 in.
4. Distance to:
   Well over 100 ft.
   Pressure line NA ft
   Property Line 50 ft.
   Foundation 25 ft.

C Distribution Box or Drop Box

Distance and Direction from septic tank: 8 ft. SE

D. Drainfield/Absorption Field

☑ Trench ☐ Bed

1. Type: ☐ Perforated Pipe ☐ Chamberless ☑ Other
   Material brand and inside width of Chamberless: EZ Flow, Polystyrene
2. Number of Laterals: 1 new 3 total
3. Length of each lateral (linear): ft. 120 new ft. 100 - perf pipe & Gravel ft. 60 ft. ____ (chamber)
4. Drainfield size: 1057 sq. ft.
5. Distance to:
   Well 100 ft.
   Pressure line NA ft.
   Property line 30 ft.
   Depth of Groundwater over 10

Was the Onsite Wastewater System covered prior to LLCHD inspection? ☐ Yes ☑ No

If Yes. the Certified Professional must sign below for final approval:

I swear and affirm that the system complies with Lincoln Municipal Code (LMC) 24.38 and/or County Resolution R-13-0062 requirements and that the information and documentation submitted are true and accurate.

Certified Professional Signature: _____ Date: 12 Jan 2021

Complete As-Built drawing on the back of this form.